SELECTED BEHAVIORAL AND SOCIAL-LEVEL THEORIES IN HIV PREVENTION¹

Selected Behavioral Theories: Why Do People Behave As They Do?

Health Belief Model

A health education approach used to explain a wide variety of prevention and screening behaviors, including HIV risk. Postulates four key health beliefs that produce a readiness to act:

- perceived personal susceptibility
- perceived severity of the condition
- perceived efficacy of the behavior
- barriers to the behavior

Cue to action are often considered necessary to initiate action once readiness is above threshold. Personal and social characteristics can modify the behavior. Choice of the factor(s) to address is based on behavioral research that identifies that factor as an important determinant in the target population.

Theory of Reasoned Action

A social psychological approach dealing with relations among beliefs, attitudes, intentions, and behavior used to understand health behaviors in a variety of domains, particularly HIV. Based on the assumption that behavior will change if the cognitive structure underlying the behavior changes at one or more of four levels:

- 1. intention to perform the behavior;
- 2. personal attitudes and social factors that affect the intention to perform;
- 3. perceived positive outcome underlying attitude;
- 4. normative beliefs (about individuals and groups) and motivation to comply with these norms.

Choice of factor(s) to address is based on empirical research with the target population.

Social Cognitive Learning Theory

An approach rooted in learning approaches to psychology and clinical psychology applications based on a relationship among the person, behavior, and environment. Two sets of cognitions are important in changing behavior: 1) outcome expectations, whether the person thinks the behavior will lead to positive, rather than negative consequences; and 2) self-efficacy, the person's belief in his/her capability and confidence in performing the behavior. The importance of self-efficacy is a particular contribution of Social Cognitive Learning Theory.

Common Theoretical Factors Affecting HIV Risk Behavior

Expected Outcomes (attitudes): Believes that the benefits outweigh the disadvantages.

Intention: Strong positive intention to perform the behavior.

Skills: Possesses the skills to perform the behavior.

Self-efficacy: Believes he/she can perform the behavior.

Emotion: Believe the behavior will produce a positive, rather than a negative, emotional response.

Self-standards: Believes the behavior is consistent with self-image.

Perceived Social Norms: Perceives greater social pressure to perform the behavior than not to do it.

Barriers: Experiences fewer environmental constraints to perform a behavior than not to do it.

Trans-theoretical Model: How Do People Change Their Behaviors?

Often referred to as "Stages of Change," the Trans-theoretical Model proposes that behavior change occurs in a series of stages. Individuals start with not intention to change, form weak intentions, strengthen these intentions, try the behavior inconsistently at first, then finally adopt the new behavior as a routine part of their lives.

Effectiveness interventions first determine where the individual or population is on the continuum of behavior change and move them to a subsequent, more advanced state. To be effective, intervention methods and messages must be targeted to the specific needs and stage of an individual or group.

The various factors from the three major theories above can help move persons from stage to stage.

Stages of Change

- 1. *Pre-contemplation:* No intention to change, unaware or risk, deny consequences of risk behavior.
- 2. *Contemplation:* Aware a problem exists, seriously thinking about overcoming it, have not yet made a commitment to action.
- 3. *Preparation:* Intend to take action in the near future, may have taken inconsistent action in recent past.
- 4. *Action:* Modifies behavior, experience, or environment to overcome problem; change is relatively recent.
- 5. *Maintenance:* Works to prevent relapse and maintain behavior change over a long period of time.

Selected Social-Level Theoretical Approaches: How Do Social Environments Affect Individual Behavior?

Diffusion Theory

Illustrates the process by which an idea or practice is spread throughout a social system from person to person by way of particular channels. Diffusion theory considers the characteristics of the cultures involved as well as a given innovation to determine whether it is more or less likely that the innovation will be adopted by a particular group or culture.

Leadership-Focused Models

Combines aspects of diffusion theory and community organizing theory. Naturally emerging leaders within groups are encouraged to exhibit and communicate an innovation to their peers. Because these innovations may be different from the group's established behaviors or social norms, these models are focused on how risk-reduction strategies become the norm within a social structure. The effectiveness of leadership models depends on the level of resistance to the change among powerful segments of the group, the lifespan of the social networks involved, and

the duration of influence of the leaders who are communicating the innovation.

Social Network Theory

Describes relationships or interactions between two or more people. Social networks are defined in terms of family relationships, friendships, or commercial relationships. Researchers characterize the focus of social networks either in terms of the individual and his or her relationships to others or in terms of any set of linkages among people in a given group or network. Understanding social networks is important in HIV prevention because transmission occurs between two people operating within a network. Additionally, a person may serve as a link between two seemingly unconnected networks. Some research suggests that using a network as the target for an HIV prevention intervention may be effective, but additional research is needed to explore the use of social network theory in interventions.

Social Movement/Community Mobilization Theory

Describes how a culture's institutions, experiences, or characteristics can be changed by social movements begun by members of that culture. Local popular involvement and mobilization, such as occurred in gay and lesbian communities during the 1980s in response to AIDS, can be effective in creating change necessary for improving the health of a community. Existing or emerging local leaders usually initiate and maintain social movements, but they also occur as a result of outside interventions.

¹ "Appendix B: Quick Guide to Key Behavioral and Social-Level Theories in HIV Prevention" What Intervention Studies Say About Effectiveness: A Resource for HIV Prevention Community Planning Groups, The Academy for Educational Development. Funding provided by the Centers for Disease Control and Prevention. May 1996.